

APPLICATION SPECIAL USE PERMIT

ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

[-	.] Change o	f Ownershi	p [] Minor	Amendment	
		Hi c			
[must use black ink or	type]				
PROPERTY LOCATIO	N: 625 First Str	eet, Alexandria	, VA 22314		
TAX MAP REFERENC		07-05-		ZONE: CD	
APPLICANT		62			
Name:	HI Alexandria I	Lessee, LLC			
Address.	625 First Stree	et, Alexandria, \	/A 22314		
PROPERTY OWNER					
Name:	HI Alexandria	Lessee, LLC			
Address:	625 First Stree	t, Alexandria, V	'A 22314		_
SITE USE:	Hotel	72.12			
Business Name:	Current: Holida	av Inn Old Town	Proposed (i	f changing):	
THE UNDERS THE UNDERS THE UNDERS THE UNDERS THE UNDERS THE UNDERS	special use permit, IGNED hereby application A, Section IGNED, having of also attests that a	including all oth oplies for a Spec 11-509 and 11-5 obtained permiss II of the informati	er applicable City codes ial Use Permit for Mino 11 of the 1992 Zoning C ion from the property ow on herein required to be	se permit, hereby agrees to comp and ordinances. r Amendment, in accordance ordinance of City of Alexandria, Volumer, hereby requests this special furnished by the applicant are tr	with the irginia.
correct and accurate to th	e best of his/her k	nowledge and be		es at	
Christie Blomquist			- GNMOS	Gonzat	_
Print Name of Applicant or	Agent	940	Signature	V	
625 First Street			202-787-3319		_
Mailing/Street Address		m. y . *	Telephone #	Fax #	
Alexandria, VA 22314	Zin Codo	# T. T.	cblomquist@pmho	telgroup.com	_
City and State	Zip Code	3/23 B	Email address 6.27.18		
			Date		-
	DO NOT	WRITE IN THIS	SPACE - OFFICE US	E ONLY	
Application Received:			Fee Paid: \$		
Legal advertisement: ACTION - PLANNING CO	MMISSION		ACTION - CITY COU	VCIL:	

Special Use	Permit	#
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The following information must be furnished to the Department of Planning and Zoning to determine if the current use conducted on the premises complies with the special use permit provisions and all other applicable codes and ordinances.

1.	Please describe prior special use permit approval for the subject use. Most recent Special Use Permit # 99-0082
	Date approved: 9 / 7 / 99 month day year
	Name of applicant on most recent special use permit Meristar Hospitality Operating Partnership
	Use Hotel with internal restaurant.
	Describe below the nature of the <i>existing</i> operation <i>in detail</i> so that the Department of ng and Zoning can understand the nature of the change in operation; include information regarding type of ion, number of patrons served, number of employees, parking availability, etc. (Attach additional sheets if sary.)
Hotel	. No changes in current operation of business. No changes in Parking
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	2年長。
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3. Describe any proposed changes to the business from what was represented to the Planning Commission and City Council during the special use permit approval process, including any proposed changes in the nature of the activity, the number and type of patrons, the number of employees, the hours, how parking is to be provided for employees and patrons, any noise emitted by the use, etc. (Attach additional sheets if necessary)				
NONE.				
	100 pt 200			
		TOTAL		
		300		
- 2000				
	2000			
		<i>y</i> 222		
	i di			

e use is closed, provide the date closed. month day scribe any proposed changes to the conditions of the sonE. the hours of operation proposed to change? yes, list the current hours and proposed hours: Proposed Hours: Proposed Hours: Proposed Hours: I the number of employees remain the same? Yes, list the current number of employees and the proposed number.	✓ No
the hours of operation proposed to change? Yes, list the current hours and proposed hours: Proposed Hours: Proposed Hours: Proposed Hours: Proposed Number of Employees: Proposed Number of Employees:	ecial use permit:
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there be any renovations or new equipment for the b	No
there be any renovations or new equipment for the besoribe the type of renovations and/or list any new equipment	er of Employees:
there be any renovations or new equipment for the bs, describe the type of renovations and/or list any new equipment	
	siness?Yes oposed.
	<u> </u>
you proposing changes in the sales or service of alcoholic s, describe proposed changes:	
	everages?Y

		Special Use Permit #
Is off-street parki If yes, how many spa parking garage; 1	ng provided for your employees ices, and where are they located? 5 spaces	Yes No
Is off-street parki If yes, how many spa parking garage; 1	ng provided for your customers ices, and where are they located? 25 spaces	;? X Yes No
If yes, describe the cu		s or patrons served? Yes ted and the proposed number of seats type (i.e. bar stools, seats at tables, et
Current:	g _s Pro	oposed:
	80. B	
If yes, attach drawing devoted to uses, i.e. s	ges to the structure or interior is showing existing and proposed layor storage area, customer service area, a if increase in the building area devicting amount of building area and the	uts. In both cases, include the floor ar nd/or office spaces. voted to the business? Yes
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Special Use Permit #	Special	Use	Permit	#	
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17. Each application shall contain a clear and concise statement identifying the applicant, including the name and address of each person owning an interest in the applicant and the extent of such ownership interest. If the applicant, or one of such persons holding an ownership interest in the applicant is a corporation, each person owning an interest in excess of ten percent (3%) in the corporation and the extent of interest shall be identified by name and address.

For the purpose of this section, the term "ownership interest" shall include any legal or equitable interest held in the subject real estate at the time of the application. If a nonprofit corporation, the name of the registered agent must be provided.

Please provide ownership information here: HI Alexandria Lessee LLC d/b/a Holiday Inn Old Town, 625 First Street, Alexandria, VA 22314						
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Y 1977						
	945					